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Details:

(FORM UPDATED: 08/11/2010)

WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

2009-10

(session year)

Senate

(Assembly, Senate or Joint)

Committee on ... Public Health, Senior Issues, Long-Term Care, and Job Creation (SC-PHSILTCJC)

COMMITTEE NOTICES ...

- Committee Reports ... CR
- Executive Sessions ... ES
- Public Hearings ... PH

INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... Appt (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... CRule (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)

(ab = Assembly Bill)

(ar = Assembly Resolution)

(ajr = Assembly Joint Resolution)

(sb = Senate Bill)

(**sr** = Senate Resolution)

(sjr = Senate Joint Resolution)

Miscellaneous ... Misc



Wisconsin Dietitian Licensure Bill

Organizations Supporting Senate Bill 115

Organizations registered in support of SB 115 with the WI GAB:

- Wisconsin Dietetic Association
- Wisconsin Medical Society
- Children's Hospital & Health System
- Wisconsin Nurses Association
- American Heart Association
- Wisconsin Public Health Association
- Wisconsin Association of Local Health Departments & Boards
- School Nutrition Association of Wisconsin
- Wisconsin Health Care Association

Other organizations that publicly support SB 115:

- UW Hospital & Clinics
- ThedaCare
- Affinity Healthcare
- Bellin Health
- Gundersen Lutheran Medical Center Nutrition Department
- Wisconsin Partnership for Activity and Nutrition (WIPAN)
- Wisconsin Diabetes Advisory Group
- Wisconsin WIC Association
- Northeast WI Association of Diabetes Educators (NEWADE)
- West Central Wisconsin Chapter of the American Association of Diabetes Educators (WCWAADE)



Patient Care Services and Office of the Chief Nurse Executive 600 Highland Ave. Madison, WI 53792 608.263.8665 608.263.9830 Fax

August 7, 2009

Wisconsin Dietetic Association c/o Lynn Edwards, RD, CD, Executive Director 1411 West Montgomery Street Sparta, WI 54656-1003

RE: Senate Bill 115 - Dietitian Licensure

The University of Wisconsin Hospital and Clinics supports the Wisconsin Dietetic Association in their effort to pass Senate Bill 115, legislation that would license dietitians and nutritionists in Wisconsin and create a scope of practice for these highly-trained health care professionals.

Dietitian and nutritionist licensure is a safety measure for Wisconsin citizens. Health care consumers deserve access to reliable, high-quality nutrition counseling and therapy. Unfortunately, there have been many documented cases where individuals have received poor nutrition advice from unqualified practitioners, which has led to bad medical outcomes for patients across the state.

As mentioned-above, Senate Bill 115 would create a licensing standard for dietitians and nutritionists as well as a statutory scope of practice to ensure only qualified practitioners — who have met specific education and experience requirements — are able to provide nutrition therapy. Nutrition therapy is a complex practice used to treat specific chronic illnesses, such as diabetes and heart disease.

With several of the leading causes of death in our country linked to diet and lifestyle, individuals are commonly seeking expert nutrition therapy to prevent or treat serious illness and disease. It is more important than ever to ensure only qualified health care professionals are providing the nutritional assessments and interventions that could have life-or-death implications.

By licensing dietitians and nutritionists in Wisconsin, Senate Bill 115 will increase access to advanced nutrition care. To avoid making payments to unqualified practitioners, many insurance companies require health care providers to be licensed by the state for reimbursement. If consumers don't have to pay large out-of-pocket expenses, they're more likely to take advantage of cost-effective, preventative nutrition care.

The University of Wisconsin Hospital and Clinics supports the Wisconsin Dietitian Licensure Bill to help improve access to the highest-quality nutrition counseling and therapy.

Sincerely,

Maureen P. McCausland, DNSc, RN, FAAN Senior Vice President, Patient Care Services

Therewas & McCanellest

and Chief Nursing Officer



WEWAADE

09-09-09

Wisconsin Dietetic Association c/o Lynn Edwards RD, CD Executive Coordinator 1411 West Montgomery St Sparta, WI 54656 -1003

Re Dietitian Licensure Bill

The West Central Wisconsin Chapter of the American Association of Diabetes Educators (WCWAADE) supports the efforts of the Wisconsin Dietetic Association and the passage of the Dietitian Licensure Bill SB: 115.

WCWAADE is a regional, multi-disciplinary professional membership organization dedicated to advancing practice of:

- · Diabetes self-management training and care as integral components of health care for persons with diabetes
- · Lifestyle management for the prevention of diabetes, including Medical Nutrition Therapy by Registered Dietitians

The West Central Wisconsin Chapter of the American Association of Diabetes Educators is made up of the leading authorities in northwest Wisconsin in diabetes self-management training and in lifestyle management for the prevention of and management of diabetes. WCWAADE advocates for improved access to diabetes self-management training, and prevention training.

Dietitians and nutritionists are not currently licensed in WI. As a result, a wide variety of people call themselves "nutrition experts". Bookstores, television informercials, and nutrition /weight loss websites are filled with an array of products and information that may not be credible. The public deserves to know when the information being given is bases on science. They also deserve to know if the information is being given by people who have appropriate education and experience.

Licensure of dietitians and nutritionists protects the public by clearly identifying individuals that have met specific education and credentialing requirements. This bill would establish a scope of practice and title protection for Registered Dietitians (RD's), ensuring that only qualified individuals provide Medical Nutrition Therapy for prevention and treatment of chronic diseases and medical conditions such as Type 1 diabetes. Type 2 diabetes, gestational diabetes, and pre-diabetes. Thirty-five states as well as the District of Columbia and Puerto Rico currently license dietitians.

State licensure will help improve availability of and access to high quality nutrition services. Many Wisconsin insurance companies require licensure to reimburse health care providers so unqualified providers dispensing questionable advice are not reimbursed. Without licensure, services may not be covered regardless of whether a physician orders them. Since these services are highly cost effective, the result will be a reduction in chronic disease and also in short term and long term savings of health care dollars.

WCWAADE supports the passage of the Dietitian Licensure Bill SB 115 because of the critical nature of having access to reliable and safe nutrition information and reliable services being made readily available to professionals and consumers as we address the epidemic of diabetes in Wisconsin.

Sincerely.

Christine Veenendall, BSN, RN, CDE

President Elect WCWAADE



Affinity Medical Group

Administrative Offices 1570 Midway Place • Menasha, WI 54952

August 5, 2009

Wisconsin Dietetic Association C/O Lynn Edwards, RD, CD, Executive Director 1411 West Montgomery Street Sparta, WI 54656-1003

RE: Senate Bill 115 - Dietitian Licensure

The Affinity Health System supports the Wisconsin Dietetic Association in their effort to pass Senate Bill 115, legislation that would license dietitians and nutritionists in Wisconsin and create a scope of practice for these highly-trained health care professionals.

Dietitian and nutritionist licensure is a safety measure for Wisconsin citizens. Health care consumers deserve access to reliable, high-quality nutrition counseling and therapy. Unfortunately, there have been many documented cases where individuals have received poor nutrition advice from unqualified practitioners, which has led to bad medical outcomes for patients across the state.

As mentioned-above, Senate Bill 115 would create a licensing standard for dietitians and nutritionists as well as a statutory scope of practice to ensure only qualified practitioners — who have meet specific education and experience requirements — are able to provide nutrition therapy. Nutrition therapy is a complex practice used to treat specific chronic illnesses, such as diabetes and heart disease.

With several of the leading causes of death in our country linked to diet and lifestyle, individuals are commonly seeking expert nutrition therapy to prevent or treat serious illness and disease. It is more important than ever to ensure only qualified health care professionals are providing the nutritional assessments and interventions that could have life-or-death implications.

By licensing dietitians and nutritionists in Wisconsin, SB 115 will increase access to advanced nutrition care. To avoid making payments to unqualified practitioners, many insurance companies require health care providers to be licensed by the state for reimbursement. If consumers don't have to pay large out-of-pocket expenses, they're more likely to take advantage of cost-effective, preventative nutrition care.

The Affinity Health System supports the Wisconsin Dietitian Licensure Bill to help improve access to the highest-quality nutrition counseling and therapy.

Sincerely

Erik A. Emaus, DO, CPE

President, Affinity Medical Group

Affinity Medical Group • Affinity Occupational Health • Affinity Visiting Nurses • Calumet Medical Center Franciscan Care & Rehabilitation Center • Mercy Medical Center • Network Health Plan • St. Elizabeth Hospital A partnership of Ministry Health Care and the Wheaton Franciscan System

bellinhealth



July 22, 2009

Wisconsin Dietetic Association C/O Lynn Edwards, RD, CD, Executive Director 1411 West Montgomery Street Sparta, WI 54656-1003

RE: Senate Bill 115 - Dietitian Licensure

Bellin Health System supports the Wisconsin Dietetic Association in their effort to pass Senate Bill 115, legislation that would license dietitians and nutritionists in Wisconsin and create a scope of practice for these highly-trained health care professionals.

We feel that dietitian and nutritionist licensure is a safety measure for Wisconsin citizens. At Bellin, we believe that health care consumers deserve access to reliable, high-quality nutrition counseling and therapy. Unfortunately, some individuals have received poor nutrition advice from unqualified practitioners which may have contributed to a less than desirable health outcome.

As mentioned-above, Senate Bill 115 would create a licensing standard for dietitians and nutritionists as well as a statutory scope of practice to ensure only qualified practitioners — who have meet specific education and experience requirements — are able to provide nutrition therapy. Nutrition therapy is a complex practice used to treat specific chronic illnesses, such as diabetes and heart disease.

With several of the leading causes of death in our country linked to diet and lifestyle, individuals are commonly seeking expert nutrition therapy to prevent or treat serious illness and disease. It is more important than ever to ensure only qualified health care professionals are providing these nutritional assessments and interventions.

By licensing dietitians and nutritionists in Wisconsin, SB 115 will increase access to advanced nutrition care. To avoid making payments to unqualified practitioners, many insurance companies require health care providers to be licensed by the state for reimbursement. If consumers don't have to pay large out-of-pocket expenses, they're more likely to take advantage of cost-effective, preventative nutrition care.

Bellin Health System supports the Wisconsin Dietitian Licensure Bill to help improve access to the highest-quality nutrition counseling and therapy.

Sincerely,

George Kerwin President, CEO

THEDAS2CARE

June 9, 2009

Wisconsin Dietetic Association C/O Lynn Edwards, RD, CD, Executive Director 1411 West Montgomery Street Sparta, WI 54656-1003

RE: Senate Bill 115 - Dietitian Licensure

The ThedaCare Health Care Organization of Northeastern Wisconsin supports the Wisconsin Dietetic Association in their effort to pass Senate Bill 115, legislation that would license dietitians and nutritionists in Wisconsin and create a scope of practice for these highly-trained health care professionals.

Dietitian and nutritionist licensure is a safety measure for Wisconsin citizens. Health care consumers deserve access to reliable, high-quality nutrition counseling and therapy. Unfortunately, there have been many documented cases where individuals have received poor nutrition advice from unqualified practitioners, which has led to bad medical outcomes for patients across the state.

As mentioned above, Senate Bill 115 would create a licensing standard for dietitians and nutritionists as well as a statutory scope of practice to ensure only qualified practitioners — who have met specific education and experience requirements — are able to provide nutrition therapy. Nutrition therapy is a complex practice used to treat specific chronic illnesses, such as diabetes and heart disease.

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By licensing dietitians and nutritionists in Wisconsin, SB 115 will increase access to advanced nutrition care. To avoid making payments to unqualified practitioners, many insurance companies require health care providers to be licensed by the state for reimbursement. If consumers don't have to pay large out-of-pocket expenses, they're more likely to take advantage of cost-effective, preventative nutrition care.

ThedaCare supports the Wisconsin Dietitian Licensure Bill to help improve access to the highest quality nutrition counseling and therapy.

Sincerely.

Robin Wilson, MD

Vice President of Medical Affairs

Also welon mo

ThedaCare



May 11, 2009

Wisconsin Dietetic Association C/O Lynn Edwards, RD, CD, Executive Director 1411 West Montgomery Street Sparta, WI 54656-1003

RE: Senate Bill 115 - Dietitian Licensure

The Gundersen Lutheran Nutrition Therapy Department supports the Wisconsin Dietetic Association in their effort to pass Senate Bill 115, legislation that would license dietitians and nutritionist in Wisconsin and create a scope of practice for these highly-trained health care professionals.

Dietitian and nutritionist licensure is a safety measure for Wisconsin citizens. Health care consumers deserve access to reliable, high-quality nutrition counseling and therapy. Unfortunately, there have been many documented cases where individuals have received poor nutrition advice from unqualified practitioners, which has led to bad medical outcomes for patients across the state.

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By licensing dietitians and nutritionist in Wisconsin, SB 115 will increase access to advanced nutrition care. To avoid making payments to unqualified practitioners, many insurance companies require health care providers to be licensed by the state for reimbursement. If consumers don't have to pay large out-of-pocket expenses, they're more likely to take advantage of cost-effective, preventative nutrition care.

Gundersen Lutheran Medical Center and the Gundersen Lutheran Nutrition Therapy Department supports the Wisconsin Dietitian Licensure Bill to help improve access to the highest-quality nutrition counseling and therapy.

Sincerely.

Jennifer A. Larson, RD, CD

Administrative Director, Nutrition Therapy

Gundersen Lutheran Medical Center

March 30, 2009

Wisconsin Dietetic Association c/o Lynn Edwards RD, CD, Executive Coordinator 1411 West Montgomery St. Sparta, WI 54656-1003

Re: Dietitian Licensure Bill

The Northeast Wisconsin Association of Diabetes Educators (NEWADE) supports the efforts of the Wisconsin Dietetic Association and the passage of the Dietitian Licensure Bill SB:115.

NEWADE is a 60 member, regional, multi-disciplinary professional membership organization dedicated to advancing practice of:

- diabetes self-management training and care as integral components of health care for persons with diabetes
- lifestyle management for the prevention of diabetes, including medical nutrition therapy by Registered Dietitians

The Northeast Wisconsin Association of Diabetes Educators is the leading authority in northeast Wisconsin in diabetes self-management training and in lifestyle management for the prevention of and management diabetes. NEWADE advocates for improved access to diabetes self-management training, care and lifestyle management for prevention.

Dietitians and nutritionists are not currently licenses in Wisconsin. As a result, a wide variety of people call themselves "nutrition experts". Bookstores, television infomercials and nutrition or weight loss websites are filled with an array of products and information. The public deserves to know when the information being give is based on science. They also deserve to know if the information is being given by people who have appropriate education and experience.

Licensure of dietitians and nutritionists protects the public by clearly identifying individuals that have met specific education and credentialing requirements. This bill would establish a scope of practice and title protection for Registered Dietitians (RDs), ensuring that only qualified individuals provide medical nutrition therapy for prevention and treatment of chronic diseases and medical conditions such as type 1, type 2, gestational diabetes and pre-diabetes. Thirty-five states as well as District of Columbia and Puerto Rico currently licensure dietitians.

State licensure will help improve availability of and access to high-quality nutrition services. Many Wisconsin insurance companies require licensure to reimburse health care providers so unqualified providers dispensing questionable advice are not reimbursed. Without licensure, services may not be covered regardless of whether a physician orders them. Since these services are highly cost-effective, the result will be a reduction in chronic disease and also in short-term and long-term savings of health care dollars.

NEWADE supports the passage of the Dietitian Licensure Bill SB 115 because of the critical nature of having access to reliable and safe nutrition information and reliable services being made readily available to professionals and consumers as we address the epidemic of diabetes in Wisconsin.

Sincerely,

Deb Woelfel RD, CDE President Northeaster Wisconsin Association of Diabetes Educators, President Wisconsin Dietetic Association C/O Lynn Edwards, RD, CD Executive Director 1411 West Montgomery Street Sparta, Wisconsin 54656-1003

RE: Dietitian Licensure Bill

The Wisconsin Diabetes Advisory Group (DAG) is a statewide collaborative that addresses priority areas of diabetes care and prevention to reduce the economic, social, physical, and psychological impact of diabetes in Wisconsin. DAG supports the role of the registered dietitian in Medical Nutrition Therapy for diabetes and its co morbidities such as hypertension, dyslipidemia and chronic kidney disease.

Medical Nutrition Therapy (MNT) is a standard of care which is outlined in the Wisconsin Essential Diabetes Mellitus Care Guidelines. Within these Guidelines we note:

- Medical Nutrition Therapy (MNT) is a cornerstone of diabetes management. It is strongly recommended that a person with diabetes be referred to a registered dietitian.
- A registered dietitian (RD) has specific expert knowledge and skills to carry out the entire process from nutrition diagnosis to intervention, monitoring, and evaluation.
- Due to the complexity of diabetes nutrition issues, referral to a registered dietitian (RD) skilled in the current recommendations of diabetes care (preferably who is also a certified diabetes educator) is strongly recommended.

The Wisconsin Diabetes Advisory Group supports and promotes measures that will improve access and availability of the highest quality Medical Nutrition Therapy for people at risk or living with diabetes in Wisconsin.

Sincerely,

Diane anderson

Diane Anderson MS, RN, BC-FNP, APNP, CDE Wisconsin Diabetes Advisory Group

David Scheidt, OD

Wisconsin Diabetes Advisory Group

Wisconsin Partnership for Activity and Nutrition healthy eating · physical activity · healthy weight

February 19, 2009

Wisconsin Dietetic Association C/O Lynn Edwards, RD, CD, Executive Director 1411 West Montgomery Street Sparta, WI 54656-1003

RE: Dietitian Licensure Bill

The Wisconsin Partnership for Activity and Nutrition (WI PAN) supports the efforts of the Wisconsin Dietetic Association and the passage of the Dietitian Licensure Bill.

The Wisconsin Partnership for Activity and Nutrition (WI PAN) is a statewide coalition representing over 130 organizations and programs, who share the common mission of improving the health of our state's residents by decreasing overweight and obesity, improving nutrition and increasing physical activity. The Wisconsin Nutrition and Physical Activity State Plan provides a framework to help create and support environments that make it easier for all residents to make healthy food choices, be physically active and achieve an maintain a health weight. The Plan emphasizes strategies to:

- · Promote and support exclusive and sustained breastfeeding
- Promote increased fruit and vegetable consumption
- · Promote increased physical activity
- Reduce television time
- Reduce sweetened beverage consumption
- Reduce consumption of high-energy dense foods

Dietitians and nutritionists are not currently licensed in Wisconsin. As a result, a wide variety of people call themselves "nutrition experts". Bookstores, television infomercials and nutrition or weight loss websites are filled with an array of products and information. The public deserves to know when the information being given by "experts" is based on science. They also deserve to know if the information is being given by people who have appropriate education and experience.

Licensing of dietitians and nutritionists protects the public by clearly identifying individuals that have met specific education and credentialing requirements. This bill would establish a scope of practice and title protection for registered dietitians (RDs), ensuring that only qualified individuals are providing nutrition therapy for prevention and treatment of chronic diseases or medical conditions. Thirty-five states as well as District of Columbia and Puerto Rico currently license dietitians.

State licensing will help improve the availability and accessibility of high-quality nutrition services. Many insurance companies require licensure to reimburse healthcare professionals so that unqualified providers dispensing questionable advice are not reimbursed. Without licensure, services may not be covered regardless of whether a physician orders them. Since these services are highly cost-effective, the result will be a reduction in chronic disease and also in short-term and long-term savings of health care dollars.

WI PAN supports of the passage of the Dietitian Licensure Bill because of the critical nature of having access to reliable and safe nutrition information and related services being made readily available to professionals and consumers as we address the epidemic of obesity in Wisconsin.

Sincerely,

Susan Nitzke, PhD, RD, CD

Wisconsin Partnership for Activity and Nutrition, Chair

INCIDENT REPORT LOG

Incidents of harm by unlicensed and unqualified "nutritionists" collected from health professionals during 2006-August 2009. Names of patients, providers, and institutions removed for patient and health professional providers, and institutions removed for patient and health professional providers. providers, and institutions removed for patient and health professional privacy and fear of litigation.

Without licensure of nutrition services provided by qualified health professionals including Registered Dietitans, there is no recourse to protect the public from harm from unqualified self-proclaimed "nutritionists."

	(this.deliation lady)		
Reporting Health Professional	Credentials or Title	Presenting Problem/Incident	Nutrition/Health Outcome
Licensed Health Care provider	"Nutritionist" w/ 2-yr internet based degree from American Acaderry of Nutrition (California)	A 6 year old girl with newly diagnosed Type 1 diabetes was told by the "nutritionist" to stop taking her insulin because the diet prescribed by the "nutritionist" would heal the pancreatic cells and cure her diabetes.	There is no known cure for diabetes. Without insulin, severe high blood sugar is likely resulting in ketoacidosis. Without proper treatment, this is potentially fatal. There are numerous cases of Wisconsin parents who withheld treatment from children with Type 1 diabetes which led to the child's death. In this case, the licensed health care provider convinced the parents to resume insulin.
Clinical Dietitian Milwaukee	"Nutritionist"	1 year old pt who the doctors thought bed multiple food allergies (milk, soy, egg.wheat, nuts) but clear diagnostic testing could not be done. Mom was told by a "nutritionart" to use a certain type of "rice formula" for infants that didn't have milk or soy in it. This child was admitted to the hospital because of weight loss and severe eczema. The physicians ordered a registered dietitian consult.	RD examined the "formula" mom was providing the child was calculated out for the calorie level when it was mixed according to package directions. Normally a pediatric formula (formula for children over 1 year of age) is 20 - 30 calorie/oz; this "rice formula" was only 7 calories/oz. Additionally rice is not a complete protein which means it does not contain all of the amino acids that are essential for humans. The child was changed to a pediatric amino acid (hypoallergenic and contains all the essential amino acids) based formula which was 30 calories/oz and her weight immediately started to increase. Without the intervention of a registered dietitian, this child would have likely had serious developmental issues including poor brain development from lack of calorie intake.
Clinical Dietitian Brookfield	"Nutritionies" of "Merbalist" (erecentials unknown)	Upper class family in an urban area had their 15 y/o son with down's enrolled in RD's clinic. Pt had elevated insulin, and BMI >40. Along with RD's program, pt also sees a personal trainer who has had her own wt loss success. The trainer referred mom to a "nutritionist" and herbalist in the	Regardless of providing sound nutrition information and research supporting calcium consumption, the mother was very hesitant to re-introduce dairy and calcium-rich foods back to the pts diet. Mom did agree to 1 serving a day plus a MVI. We draw labs on a regular basis, and 3 months after mom took calcium out of the diet, the pts calcium level

		Brookfield area who told this mother to cut all fluid dairy and most calcium-rich foods from the pt's diet because calcium has a negative effect on the body and off sets metabolic functions.	dropped. Fortunately, this was enough for mom to start increasing calcium rich foods back into the pts diet. The pt is currently consuming 3-4 servings per day and no longer seeing the "nutritionist".
Public Heatth Nutritionist Chippewa Falls	"Nutritionist" w/ 2-yr degree from American Academy of Nutrition	Birth to 3 Program referred toddler w/ multiple food allergies severe enough to cause anaphylaxis to Public Heatth RD. Per Birth to 3 staff person, mom had been receiving nutrition counseling for her child from a "nutritionist" who prescribed mega doses of cod liver oil and fish oil supplements in an attempt to treat the toddler's severe eczema. The	The doses of supplements were large enough to put the child at risk for vitarrin A toxicity (potentially fatal) as well as excessive bleeding. Though no clinical testing was done to confirm diet-related mineral deficiencies, zinc and iron deficiency were suspected. Failure to three or growth failure, indicates an infant's nutritional are not being met; delayed correction of the
	(California) \$175/hr (per Birth to 3 staff)	"nutritionist" also had child on a strict diet, which contained all plant proteins. Without the fish fats, the diet was very low in essential fatty acids. The diet was also very low in iron and zinc. The child was failing to thrive.	problem can result in permanent stunting of growth and development. Upon meeting with the Public Health RD, a balanced diet was planned around the child's multiple food allergies and the eczerna is at times completely cleared. Though it does occasionally flare mildly, this is thought by health care providers and family to be related to non-diet triggers.
Clinical Dietttian Eau Claire	"Nutritionist" w/ 2-yr degree from American Academy of Nutrition* (California) *not accredited and no longer exists	A 73 year old man with Stage 4 kidnes failure was seen by "nutritionist" at the urging of his wife. The man was told to eat more legumes (beans), fruits and vegetables and whole grans.	While this is great advice for most of the healthy population, people with kidney disease need to avoid these foods due to the high potassium and phosphorus content. After following the diet for 10 days the man was admitted to critical care due to a slow heart rate (bradycardia) from an elevated potassium level. Acute dialysis was started on this patient to correct his abnormal electrolytes. Education to address diet for kidney disease was provided to the patient and his wife prior to discharge home. Total time in critical care was 2.5 days and another 1.5days on a medical floor.
Clinical dietitian in Milwaukee	'nutritionist'	A 59 year old female placed on tube feedings due to recurrent psychotic episodes where she felt food burned frer throat. Second bout of Tube feedings sparted November 2006. Husband contacted a natural horneopathic nutritionist in 6/07- they recommended pt come off some of her psychotropic medicines and take an alkaline diet with omega 3 oil. Also recommended by this nutritionist to do an overall body detox using Bendinight clay. To use soy protein, ionized water, avocado and juiced vegetables, trace minerals, soy sprout powder, neurotransmitter powder, and to	Pt was admitted to the hospital Jan 2008 - 6 months after the consultation with the "nutritionist". Pt admitted with severe protein calorie malnutrition at a weight of 84 lbs (was 100 lbs in May 2007 before consult). Her loss of muscle mass was so great that pt could not breathe on her own and had to be placed on a ventilator for life. She was in the hospital for one month and then was transferred to a ventilator nursing home where she expired a month later of pneumonia from which she could not recover due to her extremely malnourished state.

		avoid sugar and carbohydrate. Was told to keep pt on this regimen for 6 months to detoxify the body and pt will be dancing in the streets in 6 months. During the detox stage to expect pt to lose weight but will gain wt once the body is cleaned out.	
Clinical dietitian in Milwaukee	Nutritionist and homeopathic physician	A 30 year old male with brain cancer that is in remission, however lost his ability to swallow due to the brain surgery he had to remove the tumor. Is on tube feedings for complete tube feedings. Tube feedings started 1998. In 2004 he went to a homeopathic physician as were told his quality of life and prevention of cancer for reoccurring would happen if he followed this diet. Diet included blueberries, Goatein, STP, Udo, omega 3 oil. Was told that he had high homocysteine levels, hypoprotein A and C-reactive protein and fibrinogen - so was treated holistichy with putritional products to address these serum levels.	After one month on this diet pt developed kidney stones and lost weight. Also the pureed blueberries kept clogging up the feeding tube and it had to be replaced several times. Also became dehydrated and developed low serum sodium levels. After 2.5 months on the holistic diet pt had to be changed to a standard tube feeding in order to gain weight.
Certified Diabetes Educator, Nurse	Internet-based home study certificate from the American Academy of Nutrition	Patient with insulin requiring diabetes was advised by unqualified "nutritionist" to drink water to treat low blood sugar. The patient was advised by the "nutritionist" that orange juice, sugar and glucose tablets are all "poison." Patient had blood sugar of 65 at bedtime and drank water as advised by the "nutritionist." At 2 am her slood sugar was 42.	The patient was scared by such a low blood sugar, ate a fast acting carbohydrate as advised by her certified diabetes educator, and blood sugars quickly reached target levels. Extremely low blood sugar can lead to unconsciousness and is potentially fatal if untreated.
Family Practice Physician Eau Claire	Internet-based home study certificate from the American Academy of Nutrition	Middle-age worsen with scleroderma involving the gastrointesting it rect was receiving all nutrition by vein (total paremeral nutrition). She was unable to eat anything by ricith because she had no functioning stornach or intestines. The "nutritionist" advised parem to start bean diet and promised the diet would get her GI system functioning again.	The patient was under the care of a gastroenterologist who specialized in scleroderma involving the GI tract. The patient was advised not to eat the bean diet by her physician and she did not do so. Total parenteral nutrition by vein was continued. There is no evidence that a bean diet will reverse the damages to the gastrointestinal tract from advanced scleroderma, an auto-intrnune disorder with no known cure.
Endocrinologist Eau Claire	Internet-based home study certificate from the American Academy of Nutrition	Unqualified "nutritionist" made adjustments in Type 1 diabetic patient's insulin—changing both types (long acting background and short acting meal time) of insulin patient was taking. The "nutritionist" advised the patient to stop taking the long acting insulin if bed time blood sugars were within target range.	Endocrinologist advised patient to resume long acting insulin as prescribed. Not taking long acting insulin at night can lead to lack of insulin and can quickly lead to diabetic ketoacidosis, a condition that may lead to critical illness and even death. The legal department of this major clinic wrote the unqualified "nutritionist" that she does "not have the authorization to

			change the medication prescriptions of any clinic patient without prior discussion and approval of the patient's treating physician. The unqualified "numionist" denied ever receiving the letter.
Clinical Dietitian Eau Claire	Internet-based home study certificate from the American Academy of Nutrition	A Type 2 diabetic patient with kidney disease who was excreting significant protein in the urine was advised to eat a high protein diet.	A high protein diet is contraindicated for diabetic patients with kidney disease, as there is evidence that high protein concentration in the kidneys can increase kidney damage. Patient was advised by registered dietitian of appropriate diet.
Family Practice Physician	Internet-based home study certificate from the American Academy of Nutrition	"Nutritionist" told 2 patients the medications prescribed by this physician are "evil" and their illness could be cured by the bean diet. Patient with myasthenia gravis was told that a bean diet will cure his illness. Same "nutritionist" told another patient with history of blood clots in the lung to stop taking Coumadin, blood thinner medication, and that the bean diet would cure his condition.	
Clinical Dietitian	Internet-based home study certificate from the American Academy of Nutrition	Patient with congestive heart failure was hospitalized with excessive edema after following advice by "nutritionist" to eat a high bear diet and drink lots of fluids. "Nutritionist" and advised this postmenopausal patient to avoid allidairy products and did not advise calcium/witamin D replacement.	Fluid intake is restricted in patients with congestive heart failure to prevent excessive accumulation of fluid in the extremities and around the heart. While in hospital, patient was given medication for diuresis and normal fluid balance was restored. The advice to drink a lot of fluids resulted in an unnecessary hospitalization of 3 days duration. Calcium and vitamin D deficient diet increases risk of osteoporosis in postmenopausal women.
Physician's Assistant	Internet-based home study certificate from the American Academy of Nutrition	Patient with inflament toward was a auto- immune disorter with no known cure, was advised to stop his presentibed medication and eat a high bean diet.	After following the bean diet for a brief time, the inflammatory bowel disease became worse and the patient had to be hospitalized. After treatment with steroids, the inflammatory bowel disease stabilized but at a more advanced stage. Patient resumed prescribed medications.
Clinical Nutritionist/ Associate Scientist (PhD, RD) Madison	"Nutrition counselor"	Elderly men, under active surveillance for prostate can fer sought care from a nutrition counselor, who recommended several questionable supplements (which he sells from his office), 15 grams of fish firday, and coffee enemas 2-4x/day, all allegedly to "support detoxification" and "reduce inflammation while undergoing cancer treatment." The nutrition counselor also "diagnosed" the patient with "leaky gut syndrome" and prescribed total avoidance of dairy foods, in addition to some other food restrictions.	Coffee enemas are associated with rectal burn and electrolyte imbalance and can be harmful in the elderly. nutrition counselor recommendation for fish oil exceeds all known expert and health care agency recommendations. RD reviewed evidence-based nutrition recommendations for delaying progression of prostate cancer with the patient. These included a well-balanced and largely food-based approach emphasizing: (a.) a high fruit & vegetable intake (≥8 servings/d) to optimize intake of lycopene, beta-carotene and other carotenoids, fiber, indoles, and polyphenols and other antioxidant phytochemicals; (b.) food sources of vit. E to provide the full plethora of tocopherols and tocotrienols

that comprise the vit. E family; (c) a low saturated fat diet; (d.) weight maintenance within acceptable BMI range; and (e.) supplements of vit. D (total 2000 IU/d from combination of multivitarrin and cholecalderol supplements), fish oil (1-2 g/d) containing DHA and EPA, and a multivitarrin to provide the RD/AI for micronuments that may be limiting in the diet on a day-to-day basis. The local containing DHA and EPA, and a multivitarrin to provide the RD/AI for micronuments that may be limiting in the diet on a day-to-day basis. The local companies cover diabetes related Medical Nutrition Therapy, this RD has seen numerdus patients whose diabetes treatments. One of the most delayed by trying alternative treatments. One of the most commonly seen treatment is the dietary supplements used in abetes patients with diabetes. An RD understand the benefits of patients with diabetes. An RD understand the benefits of patients when the patient is told about the upper limit safe for them, they always appreciated the advice they received from the RD.	FRIBUTION
RD reports that several of her patients came toher after taking cinnamon pills which they heard helped with diabetes. Many spent over \$50 for their supplement without seeing any benefit to their blood sugar and diabetes control, when they could have spent much less money for generic diabetes medication that are proven to get the blood sugar down in conjunction with the proper diet and exercise. Others were recommended to take large doses of fish oil supplements without being asker of blood thinner medications such as Asphancommonly taken by patients with diabetes.	NOT FOR PUBLIC DISTRIBUTION
Alternative	
RD, CD, CDE, BC- ADM in Madison	9/11/09

Employee Spotlight



Janel Hemmesch, our own Wellness Gurul!

Janel Hemmesch, Public Health Nutritionist, began employment with the Health Department in 2004. Within her first year, she had begun her mission of improving the health of the community through community partnerships and infrastructure changes. Now, nearly five years later, many projects have been accomplished and others are well under way, with her biggest accomplishment being expansion of the Polk County Nutrition and Physical

Activity Coalition (NPA Coalition) from 5 active members to the current 28. Most projects are funded through grants, which Janel has sought out and wrote throughout her employment.

To the direct benefit of all employees, Janel initiated the Worksite Wellness Committee for Polk County employees and has been actively chairing the committee, writing the newsletter and helping coordinate the many wellness programs and opportunities.

2009 plans involve a large grant received from WIPAN (Wisconsin Physical Activity and Nutrition) to implement activities in multiple settings through NPA's four committees: Community, School, Worksite, and Breastfeeding. The Community Committee aims to create a local food system as a means to assure access to healthy and safe foods to everyone in Polk County, with an emphasis on fruits and vegetables. The School and Worksite

Committees' will be assisting with development of wellness committees, policies, and plans within those Polk County facilities. The Breastfeeding Committee will be aiding two worksites in the development of a breastfeeding policy and appropriate lactation room.

She has accomplished all this and more in less than half time hours because in addition to the above projects, over half of her hours are required for the WIC (Women, Infants and Children) Program, where she provides nutrition counseling for pregnant, post-partum and breastfeeding women and children under 5 years.

Janel has shown tremendous leadership by initiating many projects and assuring their sustainability to the health benefit of all in Polk County. With her many job duties and active projects Janel is a very busy woman. Yet, never a work day goes by that she doesn't have on a smile and friendly words for both co-workers and clients.

This is YOUR Newsletter

- PLEASE SEND YOUR AUGUST NEWSLETTER ARTICLES OR SUBMISSIONS TO DARLENE KUSMIREK'S ATTENTION BE-FORE THE END OF THE DAY ON TUESDAY, JULY 28TH.
- FAX: 485-9121 OR E-MAIL
 DARLEHE JUSMIREK@CO.POLK.WLUS
- THE AUGUST ISSUE WILL BE DISTRIBUTED ON TUESDAY, AUGUST 4TH WITH YOUR PAYCHECK.

The Kronos Project Implementation of the Electronic Timekeeping System

As many of you are aware, the County Board authorized the procurement of a County-wide electronic timekeeping system. Kronos Workforce Central is the selected product.

A little background... In 2007, Golden Age Manor identified the need for a new timekeeping system, on the heels of the demise of their current automated system. Due to the nature of their time reporting requirements, an automated system was a must. After completion of some initial research, it was determined that for minimal additional cost, the entire County could benefit from the purchase of an automated system for GAM. The County Board authorized a resolution to move forward with the project - develop an RFP and select a vendor. This process was completed in late 2007. However, a short time later, the resolution to sell GAM was on the table, and the Time-keeping project was put on hold.

GAM continued to work with their current, unsupported and outdated system as the GAM sale issues moved forward. Once the determination was made that GAM would remain a Countyowned entity, the need to replace their timekeeping system resurfaced with an even greater sense of urgency. Furthering the support, it was identified that GAM could recoup a large portion of the cost of the new timekeeping system through Medicald depreciation reimbursements. The GAM Board, in coordination with the Finance Committee, moved the resolution to purchase the system forward to County Board, who approved purchase and implementation.

A small project workgroup has been working on compiling the information necessary to build an automated system with the complexity our dynamic workforce requires. Twenty percent of Kronos' book of business is Government sector employers, so they are largely familiar with the needs and complexities or our organization.

So what does this mean for you as an employee of Polk County? Less, or elimination of, manual recording of time and more information at your fingertips. Most employees will use their current badges to "swipe in" at one of multiple timekeeping kiosks that will be mounted in centralized locations throughout the buildings. This will record time in and time out—eliminating the paper timecard - no need to remember to write it down or recollect your hours worked at the end of the pay period.

STORY CONTINUED ON PAGE 4

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2005 Codman Award Organization Winners Initiative Summaries

Hospital Category

"Improving Diabetes Care and Outcomes in a Rural Primary Care Clinic"

Memorial Health Center

Medford, WI

Summary

The goal of this small rural healthcare organization was to implement a clinic-wide improvement initiative that would result in improved hemoglobin A1c outcomes among patients with type 2 diabetes and to improve frequency of testing of hemoglobin A1c levels. The first activity in the initiative involved academic detailing of practitioners respecting adoption of the International Disease Center's "Staged Diabetes Management (SDM) Practice Guidelines SDM is a program for the prevention, detection, and treatment of type 1, type 2 and gestational diabetes which serves as a common "road map" for both health care practitioners and patients. The second key activity was to provide patients with access to diabetes self-management education through implementation of the American Diabetes Association (ADA) Recognized Education Program. This included Medical Nutrition Therapy (MNT) by Registered Dictitians to improve diabetes self-care knowledge, skills and behaviors among patients with diabetes.

Results

And offering patients
Health has achieved an has

Conclusion

Most impressive in validating this hospital's success were the comments and praises from a 15year old male patient and his mother. They emphasized that although this boy had been cared for over a long period at a large medical center if was this small hospital and how they responded to his needs that changed his entire response to his thress from negative to positive.



2005 Codman Award Organization Winners Luitiative Summaries

Multi-Organization

"Improving Patient Safety: Implementation of Evidence-Based Practices" Greater Cincinnati Patient Safety ICU Collaborative Cincinnati, OH

Summary

Through the Greater Cincinnati Health Council, 10 hospitals participated in a two-year Patient Safety Collaborative to systematically implement evidence-based practices to reduce central line infections using maximal sterile barriers and chlorhexidine, and to prevent surgical site infections through correct timing in the administration of prophyllactic antibiotics. The project team applied an Institute for Healthcare Improvement (IHI) model which was modified to include campaign strategies that promoted improvement activities. To permit adaptation to unique hospital processes, culture, and staffing mixes, hospital teams underwent intensive training. This training included:

- Review of epidemiologic evidence regarding the impact of central line infections on patients and interventions that could reduce those infections;
- Discussion of change theory and methods, including small tests of change; and
- Description of tools to measure change.

The didactic learning was interspersed with team project planning that facilitated tailoring of expectations across the teams.

Results

The initiative resulted in the development of a kit for care providers to maximize the ease of correct central line insertion. All sites achieved the stretch goal of reducing central line infections by 50%. At the initiative mid-point, adherence to evidence-based practices had increased from 30% to nearly 95%.

Conclusion

This initiative was successful in creating a community of practice, where common context and relationships resulted in social capital that increased innovation reduced rework and reduced learning curves.

Aurora Sinai Experience

Recognizing Aurora Stars, Planetree in action, or simply, great care

Announcing the 2007 Spirit of Planetree Award recipients

The Spirit of Planetree Awards were created to promote patient-centered care by publicly recognizing individuals from all Planetree-member organizations who personalize and demystify the healthcare experience for others as well as programs and services that support extraordinary achievement in patient-centered care. Each Planetree-member organization is invited to nominate a caregiver, physician champion and, in the spirit of pet therapy, an animal or pet that has contributed healing, therapeutic support.

Congratulations to the 2007 Aurora Sinai Medical Center Spirit of Planetree Award recipients:

Caregiver Award Janine Bamberger, MS, RD, CD Supervisor Nutrition Services

Janine Bamberger is a founding leader of Aurora Sinai's Wellness Works Planetree Work Team and has led a number of health and wellness efforts connected to several Planetree Components (Nutrition, Healing Arts, Healthy Communities and Complementary Medicine). Some of Janine's many contributions include:



- Working with Food Management to add more nutritious options in our cafeteria and vending machines, including options from Outpost Foods. Janine was also instrumental in the development of nutrition labels/information in the cafeteria.
- Transforming one of our stairwells into a "StairWELL" with soothing music and murals to encourage caregivers to increase their exercise, while leaving elevators more accessible for patients and visitors.

Simplified bed assignment process...

(continued from page 1)

These process changes and successes exemplify the level of patient care and professionalism delivered by Aurora Health Care and Aurora Sinai Medical Center nurses. Working together to share information, having open, real-time discussions to solve problems, and owning every patient's experience demonstrates their determination to provide the most patient-centered care.

 Creating and supporting wellness challenges where teams of caregivers can compete together to earn points for wellness activities.

Efforts by Janine and fellow caregivers partly inspired Aurora's system-wide wellness efforts and also resulted in Aurora Sinai winning a Wellness Councils of America 2006 Gold Level Award.

Physician Champion Award Judy Tjoe, MD Medical Director Breast Health Services

No better endorsement can be written for Dr. Tjoe than the following patient letter:

At age 46, I was diagnosed with breast cancer. Dr. Tjoe explained everything to my husband and I — what type I had...

and my mammograms and pathology reports. She let us be active in all decision-making. She gave me a hug and let me know that she was there for me.

While in the hospital, she came to see us in the evening after a full day of work. She patiently answered all of our questions. She called my house to see how I was and would call with test results because she knew how stressful waiting could be.

Right now I am in my third cycle of chemotherapy and am doing fantastic. Dr. Tjoe has literally saved my life.

Therapy Animal Award
Daisy
Handler/Owner Elaine Eisner

Daisy is a calm, kind and beautiful eight-year-old Golden Retriever who visits the patients of Aurora Sinai's Acute Care for the Elderly (ACE) and Inpatient Rehabilitation units.

Handler and owner, Elaine Eisner, pursued therapy dog certification for

Daisy when she recognized her gentle ways and love of people. Spending time with Daisy is therapeutic for Aurora Sinai patients—physically and emotionally. We hold a tremendous amount of respect and appreciation for Daisy and Elaine, and their dedication to meeting with our patients.







Memorial Health Center Medford, Wisconsin

Improving Diabetes Care and Outcomes in a Rural Primary Care Clinic

In the United States, type 2 diabetes is prevalent, despite an increased focus on improving diabetes care and outcomes by the national medical and public health communities, and the proven benefits of tighter glycemic control. In addition, data show that despite the availability of a wide variety of treatment approaches to normalize blood sugar levels, the great majority of diabetic patients remain poorly controlled. This small, rural hospital took on the challenge to improve hemoglobin A1c results among patients with type 2 diabetes and to improve the frequency hemoglobin A1c levels.

This project was initiated by a number background in diabetes care and education a collaborative effort, Memorial House Co

- Average hemoglobin A leaves miles 7 mormal levels are less than 6.8) for more than 500 diabetic patients.
- Became a state leader in advance to guidelines for frequency of checking A1c levels, achieving a 95 percent compliance in economic to the state's rate of 89 percent.
- Maintained optimal levels for HDL LDL and triglycertides in patients.
- Number of patients is a 544, up from 35 at inception in 2002.

Memorial Health Control of the contr

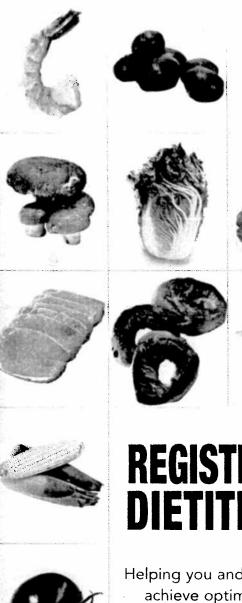
Wisconsin Dietetic Association

Taking Steps for a Healthier Wisconsin

Always ask for a Registered Dietitian (RD)

> The Wisconsin Dietetic Association, an affiliate of the American Dietetic Association, is a professional organization of food and nutrition experts committed to improving the nutrition and health of all Wisconsin residents.

www.eatrightwisc.or



REGISTERED

Helping you and your family achieve optimal health through nutrition, exercise and healthy lifestyle habits.

> Look for a Registered Dietitian (RD) when you want sound Nutrition Advice.

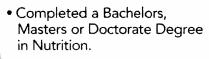


What is a Registered Dietitian?

Registered Dietitians are...



...your most credible source of nutrition information. Look for the initials RD indicating the professional has:



- Completed a 900-hour Supervised Practice Program.
- Passed a National Exam
- Kept Current through Continuing Education

Where can a Registered Dietitian be found?



- Hospitals & Health Clinics
- Physicians' Offices
- Private Practice
- Dialysis Centers
- Wellness Centers



- School Food Services
- Universities
- Public Health
- Food Industry
- Government Agencies



Look for a Registered Dietitian (RD) as your source of Sound Nutrition Advice.

Consult an RD today to start improving your health.

Visit www.eatright.org for nutrition information and to find a nutrition professional in your area.

Contacting a **R**egistered **D**ietitian...

...could be PRICELESS to your health!



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wda@centurytel.net 888-232-8631 www.eatrightwisc.org

Change Your Life Change What You Eat

What are the benefits of seeing an RD?

Nutrition education is cost effective for individuals, corporations and insurance companies. Studies show that Medical Nutrition Therapy can:

- Decrease the length of hospital stay
- Reduce the complications of chronic disease such as diabetes, heart disease and hypertension
- Decrease the chance of low birth weight infants
- Improve the health and well being of all people
- Help you change your eating habits
- Increase your performance in sports
- Help you lose weight or maintain a healthy weight

Registered Dietitians have the skills and knowledge to translate nutrition science into practical information. Contact a Registered Dietitian for all your nutritional needs.

TOP 10 REASONS TO SEE A REGISTERED DIETITIAN:

- You have high cholesterol or high blood pressure and worry that you could have a heart attack or stroke.
- You have or are at risk for diabetes and you want to prevent complications such as blindness or kidney failure.
- 3 You have digestive problems, cancer or food allergies.
- You are pregnant, trying to get pregnant, or breastfeeding your baby.
- You are concerned about your young child's weight or risk of becoming overweight.
- Your teenager has issues with food and may have an eating disorder.
- 7 You need to gain or lose weight.
- You are thinking of having or have had gastric bypass surgery.
- You're caring for an aging parent who is eating poorly or losing weight.
- You want to improve your performance in sports or just want to eat smarter.